

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/598973

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		3				
5		①				
6		①				
7		①				
8		①				
9		①				
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12		①				
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15		①				
16		①				
17		①				
18		①				
19		①				
20		①				
21		1				
22	1					
23		1				
24		1				
25		①				
26		①				
27		①				
28		①				
29		①				
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31		①				
32		①				
33			1			
34				1		
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44				1		
45				1		
46				1		
47				1		
48				1		
49				1		
50				1		
TOTAL IND.	2	↓	1	↓	0	↓
TOTAL DEP.	32	←	17	←	0	←
TOTAL CLAIMS	34		18		0	

51				1		
52				1		
53				1		
54			1			
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100						
TOTAL IND.	0	↓	1	↓	0	↓
TOTAL DEP.	0	←	7	←	0	←
TOTAL CLAIMS	0		8		0	

PTO - 1360 (REV. 04/2007)

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